

CLAIMS ONLY

Application Number

101720380

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AMENDMENT		AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend
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50						
Total Indep						
Total Depend						
Total Claims						

100

Total
Indep

16

Total
Depend

19

Total
Claims

35